PATENT APPLICATION SERIAL NO.

U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

03/18/2004 HDEMESS1 00000057 061510 10708676

01 FC:1001

770.00 DA 270.00 DA

PTO-1556 (5/87)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10708676

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS 35								RATE	FEE	7 .	RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FE	+	┨		770.00	
TOTAL CHARGEABLE CLAIMS			20		140111.6	Z Z			365.00	OR		770.00	
_			7 / 2minus 20= *			7	.	X\$ 9=		OR	X\$18=	りか	
\vdash	DEPENDENT C		3 minus 3 =					X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+145=	·	OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2		TOTAL		OR	TOTAL	1040-	
a* .	CLAIMS AS AMENDED - PART II										OTHER	THAN	
Щ	(Column 1) (Column 2) (Column 3						· ·_	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ı	+145=		OR	+290=		
		L	TOTAL		ام	TOTAL							
		(Column 1)		(Column	. 2)	(Column 3)	A	DDIT. FEE	<u></u>	10	ADDIT. FEE		
AMENDMENT B	l	CLAIMS		HIGHES	ST T		Г		ADDI-	1 1		ADDI-	
		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .	上	X43=	······································		X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT C	LAIM		┢			OR			
								+145= TOTAL		OR	+290=		
									•	OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Column		(Column 3)							
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHES NUMBEI PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	•	
	Independent	*	Minus	***		=	\vdash	X43=			X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╌┠	X40-		OR	700-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
** !	the "Highest Nur	nn i is less than the nber Previously Pa mber Previously Pa	id For IN THIS	SPACE is le	ss than	20. enter "20."	AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE		
i	he "Highest Num	ber Previously Paid	For" (Total or	ndependent)	is the h	ighest number	found	d in the app	ropriate box				